

SEMI-ANNUAL LOBBYING EXPENDITURE REPORT FOR EMPLOYERS OF LOBBYISTS

INSTRUCTIONS: This Semi-Annual Lobbying Expenditure Report is for reporting all expenditures relating to lobbying in the State of Tennessee. Pursuant to T.C.A. § 3-6-303(a), this Report is due within forty-five (45) days after the conclusion of the six-month periods ending March 31 and September 30. The Report must be filled with the Tennessee Ethics Commission, 201 4th Avenue North, Suite 1820, Nashville, TN 37243. If you have questions, please feel free to contact the Commission at (615) 253-8634 or e-mail us at ethics.counsel@state.tn.us. You must complete every item. Attach additional pages as necessary. Please note that the information listed on this Report will be posted on the Commission's website as required by T.C.A. § 3-6-303(3)(b).

1	a.	DATE OF DISCLOSURE 5/14/07		
	b.	REPORTING PERIOD [check box]:	1 – March 31 ☐ April 1 – September 30	
2.	a.	NAME OF CORPORATION/ENTITY HOOPS, LP		
	b.	NAME OF CEO, CFO, or TITLE AND NAME of PER LOBBYISTS Stephen Zito	RSON RESPONSIBLE FOR SUPERVISING	
3.	a.	ADDRESS Street or Rural Route	City State Zip Code	
		191 Beale St	Memphis TN 3810	
	b.	PHONE NUMBER (901) 205-1234		
4.	LOBBYING INTERESTS			
	a.	a. List the general subject area(s) lobbied, e.g., "healthcare," "insurance," etc.		
		Mixed Martial Art		
	b.	Describe the general nature and interest of the entity er "insurance company," "professional association," etc.	mploying or retaining lobbying services, e.g.	
		Economic Athletics	200 ETH	
			P P	
			1.1 E	
			4-	

Page 2 of 3

301(7) as " any salary, fee, payment, reimburser	PENSATION. The term "compensation" is defined by T.C.A. § 3-6-ment or other valuable consideration, or any combination thereof, npensation' does not include the salary or reimbursement of an 's regular employment."			
disclosure, compensation paid to any lobbyist who pactivities shall be apportioned to reflect the lobbyist's	yist compensation paid by the employer. For purposes of the performs duties for the employer in addition to lobbying and related is time allocated for lobbying and related activities in this state (see ative Action" and "Legislative Action," and exceptions thereto, in 1)(A)-(K). (Check the appropriate box.)			
Less than \$10,000 contract begins 5/07.	☐ At least \$10,000 but less than \$25,000			
☐ At least \$25,000 but less than \$50,000	☐ At least \$50,000 but less than \$100,000			
☐ At least \$100,000 but less than \$150,000	☐ At least \$150,000 but less than \$200,000			
☐ At least \$200,000 but less than \$250,000	☐ At least \$250,000 but less than \$300,000			
\square At least \$300,000 but less than \$350,000	☐ At least \$350,000 but less than \$400,000			
☐ If the aggregate total amount is \$400,000 or more, you must round the aggregate total to the nearest fifty thousand dollars (\$50,000):				
Tennessee. Indicate whether they are employed box. Attach additional pages as needed. Author	the individual lobbyists who rendered services in the State of within your organization by checking the "In-House Lobbyist" ity: T.C.A. § 3-6-303(a)(1).			
LOBBYIST NAME: A PAST	<u>IN-HOUSE LOBBYIST</u> □			
7. LOBBYING-RELATED EXPENDITURES NOTE: For the purposes of this Report, any effect shall be apportioned equally among those	expenditure made for the purpose of achieving a multi-state states.			
the employer to third party vendors, for the purpos opinion or grassroots action in the State of Tennerelating to printing, publishing, advertising, broadcas digital video discs, infomercials, rallies, demonstraticosts, internet services, public relations services, g	ted under 5), state the aggregate total of expenses paid directly by see of influencing legislative or administrative action through public essee. These expenditures include, but are not limited to, costs ting, paid announcements, audiotapes, videotapes, compact discs ions, seminars, lectures, conferences, postage, telephone related overnmental relations services, polling services, travel expenses or any other expense incurred lobbying. Authority: T.C.A. § 3-6-			
Less than \$10,000	☐ At least \$10,000 but less than \$25,000			
☐ At least \$25,000 but less than \$50,000	☐ At least \$50,000 but less than \$100,000			
☐ At least \$100,000 but less than \$150,000	☐ At least \$150,000 but less than \$200,000			
☐ At least \$200,000 but less than \$250,000	☐ At least \$250,000 but less than \$300,000			
☐ At least \$300,000 but less than \$350,000	☐ At least \$350,000 but less than \$400,000			
☐ If the aggregate total amount is \$400,000 or more, you thousand dollars (\$50,000):	must round the aggregate total to the nearest fifty			

SS-8011

8. AGGREGATE TOTAL OF ALL IN-STATE EVENTS

State the aggregate total amount of all employer expenditures for all in-State event(s) which was or should have been reported to the Commission pursuant to T.C.A. § 3-6-305(b)(8). Authority: T.C.A. § 3-6-303(a)(3).

9. TO BE SIGNED BY REPORTING OFFICIAL (must be attested to by a witness)

I certify that the information contained in this Report is true and that it is a complete and accurate report to the best of my knowledge information and belief.

Signature of Person Dende Person (State Complete and accurate to the best of my knowledge, information and belief.

Signature of CED/CFO of Authorized Representative

Print Plane of Person: State CEO, (Printed Name of Witness)

the undersigned, do hereby witness the above signature of the CEO, (Printed Name of Witness)

CFO or Authorized Representative, which was signed in my presence.

